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U. S. DEPARTMENT OF LABOR
CHILDREN'S BUREAU
WASHINGTON

SAVING MOTHERS.

More women 15 to 45 years of age die from conditions connected with childbirth than from any disease except tuberculosis. About 15,000 deaths from conditions connected with childbirth occur annually in the United States, and the available figures for this country show no decrease in the maternal death rate since 1900. Maternal deaths are largely preventable by proper care and skilled attendance.

These 15,000 deaths do not measure the full extent of the waste. They are merely a rough index of unmeasured preventable illness and suffering among mothers. Furthermore, certain diseases of early infancy are closely connected with the health of the baby's mother and the maternity care she has received, and these diseases cause about one-third of all the deaths occurring among babies under 1 year of age. More than 75,000 babies die each year from this group of diseases because they do not have a fair start in life.

The life and health of the mother are in every way important to the well-being of her children. Breast feeding through the greater part of the baby's first year is his chief protection from all diseases, and mothers are much more likely to be able to nurse their babies successfully if they receive proper care before, at, and after childbirth.

The expectant mother should at once consult a physician. She should remain under supervision, so that any dangerous symptom may be discovered as soon as it appears. She should learn how to take care of herself, and she should have proper food and rest and freedom from anxiety. When the baby is born the mother needs trained attendance. A difficult maternity case is one of the gravest surgical emergencies. Many people do not seem to understand that in any case complications may arise which can be met safely by prompt and skillful scientific care but which at the hands of an unskilled attendant may cost the life of mother, or child, or both. Even after confinement the mother needs continued supervision and rest until her strength has returned.

Thousands of mothers, both in city and country, do not have the essentials of safety, partly, perhaps chiefly, because they do not

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realize the dangers involved in lack of care or accept the dangers as unavoidable. Many women are at present unable to obtain proper care; but when all women and their husbands understand its importance and demand it for every mother, physicians will furnish it, medical colleges will provide better obstetrical training for physicians, and communities will see to it that mothers are properly protected.

Little has been done as yet to show women that much of the waste of mothers' lives and health is unnecessary. Even less has been undertaken by communities to provide protection for them. Many communities which have studied their typhoid and tuberculosis death rates and have undertaken costly measures to reduce them have been heedless of the death rates among mothers. It is not strange, therefore, that since 1900 the typhoid rate for the country as a whole has been cut in half, and the rate from tuberculosis has been markedly reduced, while the death rate from maternal causes has shown no demonstrable decrease.

Just how the importance of adequate maternity care is to be made plain to a community, and just how skilled care and instruction are to be made available for all mothers, are, of course, local questions to be considered by each community. The prenatal clinics and prenatal nursing which are being developed in many cities suggest a method of supervision and instruction which might well be extended. Even in cities where such work is carried on and where good hospitals are numerous the number of mothers reached is small in comparison with the number who bear their children without adequate care.

Difficulties are perhaps greatest in rural districts where the sheer inaccessibility of a physician is often added to the other elements of the problem. Here a public nursing service with headquarters at the county seat, or other accessible town, would probably be the first step, placing at the service of every expectant mother a visiting nurse who is especially equipped to give her information about personal care and to watch for symptoms of trouble demanding medical advice. As such a nursing service develops, its headquarters might become, with the cooperation of physicians, a sort of maternal and child welfare center, to which not only expectant mothers but also mothers with babies could come for instruction, examination, and advice. If no general hospital were conveniently near, a cottage hospital for mothers and babies might ultimately form a part of such a center.

A more general use of existing provisions for scientific maternity care and the extension of provisions for such care in all types of communities should serve to reduce the number of deaths among mothers

and babies and to improve the health and general condition of children throughout the country. A full discussion of the causes and prevention of maternal deaths and an analysis of available statistics are contained in a report on Maternal Mortality, published by the Children's Bureau.

The Children's Bureau has several publications which are of interest in connection with work for the welfare of mothers and babies. A list of these publications will be sent upon application to the Children's Bureau, United States Department of Labor, Washington, D. C.

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